

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL008034	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 12/10/2015
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NAME OF PROVIDER OR SUPPLIER WINDSOR HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 336 SOUTH RHODES AVENUE WINDSOR, NC 27983
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments This is a Report of a Biennial Construction Survey conducted by Greg Cates on December 10, 2015. Based on information gathered from our files, the Facility was first licensed on October 25, 2007 for Sixty (60) residents. Based on this information, we are requiring the facility to meet the 2005 Rules for the Licensing of Domiciliary Homes and the 2006 North Carolina State Building Code, Section 419- Institutional Occupancy.	C 000		
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1- Based on observations, the facility has failed to maintain the building and furnishings in good repair and clean. Findings include: a- One of the towel bars in Room 101 is hanging from the wall b- There is a pattern of corridor doors that are scarred and the finish has been removed. Doors include but are not limited to Rooms 201, 203, and the Service Hall doors. c- The backsplash in Suite 312 is loose at the sink.	C 164		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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C 164	Continued From page 1 d- The floor in front of the commode in Suite 312 is stained. e- There is pattern exhibited in most resident room bathrooms where there is at least one patch on the wall that has not been finished and painted. f- Resident Room 303 is missing two of the drawers in the built-in storage units.	C 164		
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1- Based on observations, the facility has failed to maintain the building free of hazards by not maintaining the hardware in a functioning manner. This could result in the occupant of the room being locked in the room with no way to EXIT in the event of an emergency. Findings include: a- The door handle to Suite 312 has been removed on both sides although the functioning hardware remains in the door, allowing the door to latch.	C 166		
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT	C 189		

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C 189	<p>Continued From page 2</p> <p>10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition.</p> <p>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1- Based on observations, the facility has failed to maintain the magnetic locking devices safe and operating. This could affect all persons in the building during exiting at the time of an emergency. (Note: emergency release switches at each door are functioning)</p> <p>Findings include:</p> <p>a- The magnetic locks on all EXIT doors do not release on alarm.</p> <p>b- The courtyard gate magnetic lock is not functioning.</p> <p>2- Based on observations, the facility has failed to ensure that the building is safe by not maintaining the fire resistance of building components. This deficiency directly affect all residents, personnel, and visitors by allowing the possible spread of smoke beyond the compartment of origin.</p> <p>Findings include:</p> <p>a- The right leaf of the smoke doors on the 200 Hall does not release upon detection of smoke.</p> <p>b- The corridor door to the Library does not close and latch.</p> <p>c- There are gaps around the pipes above</p>	C 189		

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C 189	<p>Continued From page 3</p> <p>the new water heater in the Water Heater Room.</p> <p>3- Based on observations, the sprinkler system is not being maintained as evidenced by the sprinkler escutcheons being lost, or dropped.</p> <p>Findings include:</p> <p>a- There is a pattern exhibited where the sprinkler escutcheons throughout the facility are either dropped, loose, or missing, exposing a gap around the sprinkler pipe. Locations include but are not limited to the Day Room, Private Dining, corridors, and the Kitchen.</p> <p>4- Based on observations, the facility has failed to maintain the building electrical system safe and operating.</p> <p>Findings include:</p> <p>a- The light fixture at the rear EXIT from the Kitchen is missing the light bulb. b- The overhead light fixture in the Day Room is missing the globe.</p> <p>5- Based on observations, the facility has failed to maintain the plumbing systems safe and operating.</p> <p>Findings include:</p> <p>a- The commode is loose at the base and water is present in the 100 Hall Spa.</p>	C 189		